

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH
County of Wm. burg
Township of King
or
Inc. Town of.....
or
City of.....

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
20448

Registration District No. 422 Registered No. 47
(For use of Local Registrar)

(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Naoma Flagler If child is not yet named, make supplemental report as directed

3) BOY OR GIRL girl 4) Twin or Triplet? No 5) Number in order of birth 1 6) Are Parents Married? yes 7) DATE OF BIRTH June 14 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Willie Flagler
(9) PRESENT POSTOFFICE OF FATHER Kingsree S.C.
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 21 (Years)
(12) BIRTHPLACE Wm. burg Co. S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 1

MOTHER.
(14) NAME BEFORE MARRIAGE Isabelle Chandler
(15) PRESENT POSTOFFICE OF MOTHER Kingsree S.C.
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 17 (Years)
(18) BIRTHPLACE Wm. burg Co. S.C.
(19) OCCUPATION Housekeeper
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was... alive ... at 4 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Rosa + Wilson
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Kingsree S.C.

Given name added from a supplemental report

(26) Witness Willie Flagler
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed June 24 1922 (28) B. E. Clarkson
Local Registrar.

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.